SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE	NU	MBER	:	PAGE 79 OF 191					
(che	ck only	/ one)								
X	11a		11b		11c		12			
	13		14		15		16			17

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or for commercial purposes, other than usin	g the name and address of any political committee to	o solicit contributions from such committee.				
/	esiologists Political Action Committee	÷				
Full Name (Last, First, Middle Initial) Brian M. Keech M.D. Mailing Address 935 S Pennsylvania St	Date of Receipt					
City	State Zip Code CO 80209	06 03 2015 Transaction ID : C3018753				
FEC ID number of contributing federal political committee.	C 80209	Amount of Each Receipt this Period 250.00				
Name of Employer Denver Health and Hospital Authority	Occupation Anesthesiologist					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
Full Name (Last, First, Middle Initial) Jason D. Keller D.O. Mailing Address 1924 Alcoa Hwy., # U109	Date of Receipt					
City Knoxville	State Zip Code TN 37920-1511	06 23 2015 Transaction ID : C3034835 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	41.67				
Name of Employer university anesthesiology	Occupation anesthesiologist					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02					
Full Name (Last, First, Middle Initial) C. Jessica Kenaston M.D.						
Mailing Address 6 Alden Rd	Chata 7: Onda	06 18 2015				
City Poughkeepsie	State Zip Code NY 12603-4002	Transaction ID : C3029885 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	83.34				
Name of Employer North American Partners in Anesthesia	Occupation Anesthesiologist					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04					
SUBTOTAL of Receipts This Page (options	al)	375.01				
TOTAL This Period (last page this line nur	nber only)					